2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 11, 2004
Secretary of State

DOCUMENT# K80786

Entity Name: P.A.P. FINANCIAL, INC.

Current Principal Place of Business:

5725 MARGATE BLVD.
MARGATE, FL 33063

New Principal Place of Business:

4805 QUEEN PALM LANE
TAMARAC, FL 33319

Current Mailing Address:

5725 MARGATE BLVD.
MARGATE, FL 33063

New Mailing Address:

4805 QUEEN PALM LANE
TAMARAC, FL 33319

FEI Number: 65-0131151 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

COHEN, RITA
4805 QUEEN PALM LANE
TAMARAC, FL 33319 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: COHEN, STANLEY,
Address: 4805 QUEEN PALM LANE
City-St-Zip: TAMARAC, FL 33319

Title: VPS ( ) Delete
Name: COHEN, RITA,
Address: 4805 QUEEN PALM LANE
City-St-Zip: TAMARAC, FL 33319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: COHEN, STANLEY,
Address: 4805 QUEEN PALM LANE
City-St-Zip: TAMARAC, FL 33319

Title: VPSD (X) Change ( ) Addition
Name: COHEN, RITA,
Address: 4805 QUEEN PALM LANE
City-St-Zip: TAMARAC, FL 33319

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STANLEY COHEN PD 10/11/2004

Electronic Signature of Signing Officer or Director — Date